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Date: 7-Dec-04

<b>To:</b>		<b>Art Unit:</b>
Examiner: ISMAEL QUINONES	(703) 872-9306	2686
USPTO		
<b>From:</b>	<b>Fax:</b>	<b>M/S:</b>
Lanny L. Parker	(480) 715-7738	OC2-157

**Subject:**

**Application No.:** 10/026,426

**Filed:** 12/18/2001

**Inventor:** Benjamin K. Gibbs

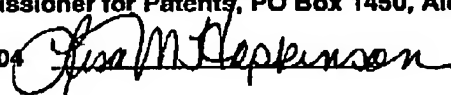
**Docket No.:** 42390P12945

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Included in this transmission:

Fax Cover Sheet (1 page)

Transmittal Form (1 page)

Response (12 pages)

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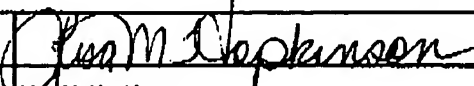
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/026,428	
	Filing Date	12/18/2001	
	First Named Inventor	Benjamin K. Gibbs	
	Art Unit	2688	
	Examiner Name	QUINONES, Israel C.	
Total Number of Pages in This Submission	14	Attorney Docket Number	42390P12945

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax Cover Sheet
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	INTEL CORPORATION		
Signature			
Printed name	Lanny L. Parker		
Date	December 7, 2004	Reg. No.	44,281

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Signature	
Typed or printed name	Lisa M. Hopkinson
Date	December 7, 2004

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42390P12945

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****RECEIVED  
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In re application of: ) December 6, 2004  
)  
**Benjamin K. Gibbs** )  
)  
Serial No.: 10/026,426 ) Group Art Unit: 2686  
)  
Filed: December 18, 2001 ) Examiner: Quinones, Ismael C.

**For: WIRELESS TRICKLE SYNC DEVICE****CERTIFICATION OF FACSIMILE TRANSMISSION**

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Lisa M. Hopkinson

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 12/7/2004  
SIGNATURE DATE

**Response to Office Action**

Mail Stop: Amendment  
Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed October 5, 2004, please reconsider the above-identified patent application in view of the remarks and amendments below. Applicant would like to thank the Examiner for his efforts in identifying issues with this application.

Applicant believes the following is a complete response to the issues raised by the Examiner and that the following amendments and comments place the application into condition for allowance.